

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

West Virginia Republican Party, Inc.

ADDRESS (number and street)

5 Greenbrier St

☐Check if different
than previously
reported. (ACC)

Charleston

WV

25311

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00417063

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☒

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

07

01

2010

through

07

31

2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Michelle Wilshire

Signature of Treasurer

Electronically Filed by Michelle Wilshire

Date

08

20

2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 32

Write or Type Committee Name
West Virginia Republican Party, Inc.

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2010	7507.93
(b) Cash on Hand at Beginning of Reporting Period	11207.17	
(c) Total Receipts (from Line 19)	55155.52	146928.01
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	66362.69	154435.94
7. Total Disbursements (from Line 31)	52993.15	125299.64
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	13369.54	29136.30
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	39927.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

3 / 32

Write or Type Committee Name

West Virginia Republican Party, Inc.

Report Covering the Period:

From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	4545.52	37163.07
(ii) Unitemized	5110.00	62004.94
(iii) TOTAL (add Lines 11(a)(i) and (ii)	9655.52	99168.01
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	2260.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	9655.52	101428.01
12. Transfers From Affiliated/Other Party Committees	45500.00	45500.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	55155.52	146928.01
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	55155.52	146928.01

DETAILED SUMMARY PAGE

of Disbursements

4 / 32

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	52993.15	125299.64	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	52993.15	125299.64	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	52993.15	125299.64	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	52993.15	125299.64	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 32

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	9655.52	101428.01
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9655.52	101428.01
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	52993.15	125299.64
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	52993.15	125299.64

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

A.

Full Name (Last, First, Middle Initial)

Mr. Joseph P. Cincinnati

Mailing Address 84 Rue De Todd

City

Martinsburg

State

WV

Zip Code

25403-1159

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 1 / 2 0 1 0

Transaction ID: AFB4785ADF6D44508B01

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Dr. Kathy D. Harvey, D.O.

Mailing Address P.O. Box 1756

City

Logan

State

WV

Zip Code

25601-1754

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 1 / 2 0 1 0

Transaction ID: AEB6C54E2E8E84A93A15

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Mr. Lewis H. Rexroad

Mailing Address 126 Gihon Meadows Dr.

City

Parkersburg

State

WV

Zip Code

26101-9005

FEC ID number of contributing
federal political committee.

C

Name of Employer
UPS

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 8 / 2 0 1 0

Transaction ID: AE63037F4D69448B28A5

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 32

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

A.

Full Name (Last, First, Middle Initial)

Dr. Douglas E. McKinney, MD

Mailing Address 636 Rivendell Drive

City

Bridgeport

State

WV

Zip Code

26330-1358

FEC ID number of contributing
federal political committee.

C

Name of Employer
Va Medical CenterOccupation
M.D.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5472.55

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	1	0

Transaction ID: A854BB9810C774C799A8

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Mr. Jackson L Smith

Mailing Address PO Box 457

City

Lost Creek

State

WV

Zip Code

26385-0457

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	1	0

Transaction ID: A02A7572CEC964E2B858

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Frank W. Tuckwiller

Mailing Address Rt 2, Box 322

City

Lewisburg

State

WV

Zip Code

24901-9341

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	1	0

Transaction ID: A9481015429F840898D1

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

A.

Full Name (Last, First, Middle Initial)

Mrs. Melody L. Potter

Mailing Address 105 Newcomer Rd.

City

Charleston

State

WV

Zip Code

25309-8544

FEC ID number of contributing
federal political committee.

C

Name of Employer
Tri-Star Coal Sales Compa-
ny, Inc.

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 6 / 2 0 1 0

Transaction ID: AC1F6BBB231394153997

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Kathy Balike

Mailing Address 1130 Blue Horizon Dr.

City

Morgantown

State

WV

Zip Code

26501-2063

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 0 / 2 0 1 0

Transaction ID: A23428E8BFB2E454FB9D

Amount of Each Receipt this Period

400.00

C.

Full Name (Last, First, Middle Initial)

Phil Davis

Mailing Address RR 2

City

Pennsboro

State

WV

Zip Code

26415-9802

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 7 / 2 0 1 0

Transaction ID: A724A40C0AEA14254BCE

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

940.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 / 32

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

A.

Full Name (Last, First, Middle Initial)

Dr. Douglas E. McKinney, MD

Mailing Address 636 Rivendell Drive

City

Bridgeport

State

WV

Zip Code

26330-1358

FEC ID number of contributing
federal political committee.

C

Name of Employer
Va Medical Center

Occupation
M.D.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5552.55

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 7 / 2 0 1 0

Transaction ID: A7614684DACE744EAA64

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

Dr. Douglas E. McKinney, MD

Mailing Address 636 Rivendell Drive

City

Bridgeport

State

WV

Zip Code

26330-1358

FEC ID number of contributing
federal political committee.

C

Name of Employer
Va Medical Center

Occupation
M.D.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5552.55

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 7 / 2 0 1 0

Transaction ID: AEF4B793A7218471FA99

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

Mr. Romey L. Nelson

Mailing Address 6980 Lick Creek Rd.

City

Danville

State

WV

Zip Code

25053-7050

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 7 / 2 0 1 0

Transaction ID: A39842801716B4D4A9F5

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

130.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

A.

Full Name (Last, First, Middle Initial)

Mrs. Melody L. Potter

Mailing Address 105 Newcomer Rd.

City

Charleston

State

WV

Zip Code

25309-8544

FEC ID number of contributing
federal political committee.

C

Name of Employer
Tri-Star Coal Sales Compa-
ny, Inc.

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 7 / 2 0 1 0

Transaction ID: A8FE066B9C9E145618A1

Amount of Each Receipt this Period

50.00

In-kind:business mailing
permit

B.

Full Name (Last, First, Middle Initial)

Elizabeth Solomon Raese

Mailing Address Post Office Box 872

City

Morgantown

State

WV

Zip Code

26507-0872

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/a

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 7 / 2 0 1 0

Transaction ID: AF69B3F7F20914217A14

Amount of Each Receipt this Period

400.00

C.

Full Name (Last, First, Middle Initial)

Mr. Lewis H. Rexroad

Mailing Address 126 Gihon Meadows Dr.

City

Parkersburg

State

WV

Zip Code

26101-9005

FEC ID number of contributing
federal political committee.

C

Name of Employer
UPS

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1020.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 7 / 2 0 1 0

Transaction ID: AF1C14FC285494A27BE3

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

470.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

A.

Full Name (Last, First, Middle Initial)

James H Harless

Mailing Address PO Box 1210

City

Gilbert

State

WV

Zip Code

25621-1210

FEC ID number of contributing
federal political committee.

C

Name of Employer
International Industries

Occupation

Businessman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 3 0 / 2 0 1 0

Transaction ID: AB7E90D606E57483E972

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Eleanor Herkness

Mailing Address PO Box 511

City

Lewisburg

State

WV

Zip Code

24901-0511

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 3 0 / 2 0 1 0

Transaction ID: A1B8C4D94765F4FD7A74

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Dr. Douglas E. McKinney, MD

Mailing Address 636 Rivendell Drive

City

Bridgeport

State

WV

Zip Code

26330-1358

FEC ID number of contributing
federal political committee.

C

Name of Employer
Va Medical Center

Occupation

M.D.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6008.07

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 3 1 / 2 0 1 0

Transaction ID: AA04FA51ED9E844BCA01

Amount of Each Receipt this Period

455.52

In-kind: mileage and travel
exp

SUBTOTAL of Receipts This Page (optional)

1955.52

TOTAL This Period (last page this line number only)

4545.52

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 32

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

A.

Full Name (Last, First, Middle Initial)

Republican National Committee

Mailing Address 310 First St, SE

City

Washington DC

State

DC

Zip Code

20003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 2 / 2 0 1 0

Transaction ID: AE1D035AD85944A8AB1B

Amount of Each Receipt this Period

33000.00

B.

Full Name (Last, First, Middle Initial)

National Republican Senatorial Committee

Mailing Address 425 2nd Street, NE

City

Washington

State

DC

Zip Code

20002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 3 / 2 0 1 0

Transaction ID: AF50AC8469C0546E89DB

Amount of Each Receipt this Period

12500.00

SUBTOTAL of Receipts This Page (optional)

45500.00

TOTAL This Period (last page this line number only)

45500.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 / 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

A. Full Name (Last, First, Middle Initial) Appalachian Electric Power	Transaction ID: BB513341F1105427C90A Date of Disbursement
Mailing Address PO Box 24413	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 1 / 2 0 1 0</div> </div>
City Canton State OH Zip Code 44701	Amount of Each Disbursement this Period
Purpose of Disbursement utilities	<div>53.37</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Troy A. Berman	Transaction ID: B43EB76D041554ADBA57 Date of Disbursement
Mailing Address 11 Greenbrier St Apt 19	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 1 / 2 0 1 0</div> </div>
City Charleston State WV Zip Code 25311-2182	Amount of Each Disbursement this Period
Purpose of Disbursement consulting	<div>3334.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Anthony Conchel	Transaction ID: BF64187216C1B4BA3B54 Date of Disbursement
Mailing Address 5269 Roberts Rd.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 1 / 2 0 1 0</div> </div>
City Caledonia State OH Zip Code 43314-9448	Amount of Each Disbursement this Period
Purpose of Disbursement communications	<div>1871.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

5258.37

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 / 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

A. Full Name (Last, First, Middle Initial) Erie Insurance	Transaction ID: B7A3548F56F664BAA908 Date of Disbursement
Mailing Address 100 Erie Insurance Place	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 1 / 2 0 1 0</div> </div>
City Erie State PA Zip Code 16530	Amount of Each Disbursement this Period
Purpose of Disbursement State workers' comp insurance	<div>71.88</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Erie Insurance	Transaction ID: B8AA4C1595E654736B10 Date of Disbursement
Mailing Address 100 Erie Insurance Place	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 1 / 2 0 1 0</div> </div>
City Erie State PA Zip Code 16530	Amount of Each Disbursement this Period
Purpose of Disbursement HQ Insurance Premium	<div>215.59</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) FLS Connect, LLC	Transaction ID: B4DF1C783D7EA405C969 Date of Disbursement
Mailing Address 7300 Hudson Blvd, Suite 270	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 1 / 2 0 1 0</div> </div>
City Saint Paul State MN Zip Code 55128	Amount of Each Disbursement this Period
Purpose of Disbursement fundraising	<div>3464.75</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

3752.22

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 15 / 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

A. Full Name (Last, First, Middle Initial) FLS Connect, LLC	Transaction ID: BFDA735ADC6A64891827 Date of Disbursement
Mailing Address 7300 Hudson Blvd, Suite 270	<div> <div>07</div> <div>01</div> <div>2010</div> </div>
City Saint Paul State MN Zip Code 55128	Amount of Each Disbursement this Period
Purpose of Disbursement fundraising Candidate Name	<div>3251.15</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) FLS Connect, LLC	Transaction ID: B86BD031C68644737B81 Date of Disbursement
Mailing Address 7300 Hudson Blvd, Suite 270	<div> <div>07</div> <div>01</div> <div>2010</div> </div>
City Saint Paul State MN Zip Code 55128	Amount of Each Disbursement this Period
Purpose of Disbursement fundraising Candidate Name	<div>147.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Jared Laxton	Transaction ID: BF4F4E303F8094508B10 Date of Disbursement
Mailing Address 1047 St. Ives	<div> <div>07</div> <div>01</div> <div>2010</div> </div>
City Hurricane State WV Zip Code 25526-9473	Amount of Each Disbursement this Period
Purpose of Disbursement Underwood Intern Gas Stipend Candidate Name	<div>250.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

3648.15

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 16 / 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

A.

Full Name (Last, First, Middle Initial)

David Means

Mailing Address Means Landscaping
PO Box 20347

City Charleston State WV Zip Code 25362-1347

Purpose of Disbursement
lawn care

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: BD54C61D623C44E4EB75

Date of Disbursement

07 / 01 / 2010

Amount of Each Disbursement this Period

344.50

B.

Full Name (Last, First, Middle Initial)

Mountaineer Gas

Mailing Address PO Box 362

City Charleston State WV Zip Code 25322

Purpose of Disbursement
utilities

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: B32895502FA6D453ABFC

Date of Disbursement

07 / 01 / 2010

Amount of Each Disbursement this Period

15.56

C.

Full Name (Last, First, Middle Initial)

PMI

Mailing Address 406 First St SE
3rd Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement
communications

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: B4D4DE64D1609418C927

Date of Disbursement

07 / 01 / 2010

Amount of Each Disbursement this Period

1400.00

SUBTOTAL of Disbursements This Page (optional)

1760.06

TOTAL This Period (last page this line number only)

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

West Virginia Republican Party, Inc.

FEC Schedule B (Form 3X) (Revised 02/2003)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 18 / 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

A.

Full Name (Last, First, Middle Initial)

The Heritage Company, Inc.

Mailing Address Financial Services
PO Box 16325

City Little Rock State AR Zip Code 72231-6325

Purpose of Disbursement
telemarketing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: BC286A8E89CB64B1A975

Date of Disbursement

07 / 01 / 2010

Amount of Each Disbursement this Period

1835.00

B.

Full Name (Last, First, Middle Initial)

Troy A. Berman

Mailing Address 11 Greenbrier St
Apt 19

City Charleston State WV Zip Code 25311-2182

Purpose of Disbursement
6/10 & 7/10 travel expense

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: BA5D61122F62941889B6

Date of Disbursement

07 / 06 / 2010

Amount of Each Disbursement this Period

1783.73

C.

Full Name (Last, First, Middle Initial)

Troy A. Berman

Mailing Address 11 Greenbrier St
Apt 19

City Charleston State WV Zip Code 25311-2182

Purpose of Disbursement
6/10 & 7/10 travel expense

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: B0E533E59E4AA49C1B36

Date of Disbursement

07 / 06 / 2010

Amount of Each Disbursement this Period

1562.40

SUBTOTAL of Disbursements This Page (optional)

5181.13

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 19 / 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

<p>A.</p> <p>Full Name (Last, First, Middle Initial) PMI</p> <p>Mailing Address 406 First St SE 3rd Floor</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement communications</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B51A8E0D4A6C94B6AA5A</p> <p>Date of Disbursement 07 / 06 / 2010</p> <p>Amount of Each Disbursement this Period 2300.00</p> <p>Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Greg Smith</p> <p>Mailing Address 600 55th St.</p> <p>City Vienna State WV Zip Code 26105-3218</p> <p>Purpose of Disbursement Victory 2010 Expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B7277190416AD41FFA49</p> <p>Date of Disbursement 07 / 06 / 2010</p> <p>Amount of Each Disbursement this Period 397.82</p> <p>Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Greg Smith</p> <p>Mailing Address 600 55th St.</p> <p>City Vienna State WV Zip Code 26105-3218</p> <p>Purpose of Disbursement Expenses for Regional Victory</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BA919D052EA79480EB94</p> <p>Date of Disbursement 07 / 10 / 2010</p> <p>Amount of Each Disbursement this Period 438.73</p> <p>Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional)

3136.55

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 20 / 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

A.

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 1002 Lee Street East

City
Charleston

State
WV

Zip Code
25301

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: BC811F8024E3D40BE84C

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1354.00

B.

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 1002 Lee Street East

City
Charleston

State
WV

Zip Code
25301

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B9D37115668F04EBFAA9

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1.56

C.

Full Name (Last, First, Middle Initial)

Aristotle International

Mailing Address 205 Pennsylvania Ave

City
Washington

State
DC

Zip Code
20003

Purpose of Disbursement
cc processing fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B99C8F73C304C4A84B52

Date of Disbursement

/ /

Amount of Each Disbursement this Period

23.85

SUBTOTAL of Disbursements This Page (optional)

1379.41

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 / 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

A.

Full Name (Last, First, Middle Initial)

National Media Research, Planning & Placement, LLC

Mailing Address 815 Slaters Lane

City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
advertisement

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B296FAFAEB2114640B07

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	1	0

Amount of Each Disbursement this Period

7692.96

B.

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 1002 Lee Street East

City
CharlestonState
WVZip Code
25301

Purpose of Disbursement

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B0B7B2429FFEF4F8DA1C

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	1	0

Amount of Each Disbursement this Period

1.39

C.

Full Name (Last, First, Middle Initial)

Troy A. Berman

Mailing Address 11 Greenbrier St
Apt 19City
CharlestonState
WVZip Code
25311-2182Purpose of Disbursement
severance & exp reimb

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: BC52E37D761F1482B9BA

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	9		2	0	1	0

Amount of Each Disbursement this Period

4615.38

SUBTOTAL of Disbursements This Page (optional)

12309.73

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 22 / 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

A. Full Name (Last, First, Middle Initial) Anthony Conchel	Transaction ID: BFB48C95ED19F498F80D Date of Disbursement																				
Mailing Address 5269 Roberts Rd.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	9		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	9		2	0	1	0												
City Caledonia State OH Zip Code 43314-9448	Amount of Each Disbursement this Period																				
Purpose of Disbursement communications Candidate Name	<table border="1"> <tr> <td colspan="10">825.00</td> </tr> </table>	825.00																			
825.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Fedex Kinko's	Transaction ID: BB075F77BAE7C44819EA Date of Disbursement																				
Mailing Address 400 Capitol Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	9		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	9		2	0	1	0												
City Charleston State WV Zip Code 25301	Amount of Each Disbursement this Period																				
Purpose of Disbursement Candidate Name	<table border="1"> <tr> <td colspan="10">683.70</td> </tr> </table>	683.70																			
683.70																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) PMI	Transaction ID: B5EE0A3F7EB514067B02 Date of Disbursement																				
Mailing Address 406 First St SE 3rd Floor	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	9		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	9		2	0	1	0												
City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period																				
Purpose of Disbursement communications Candidate Name	<table border="1"> <tr> <td colspan="10">1600.00</td> </tr> </table>	1600.00																			
1600.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

3108.70

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 / 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

A.

Full Name (Last, First, Middle Initial)

Cheryl Rust

Mailing Address Route 1, Box 375

City
BuffaloState
WVZip Code
25033-9766Purpose of Disbursement
salary

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B966682D1C8AE4FB89F4

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	9		2	0	1	0

Amount of Each Disbursement this Period

2400.00

B.

Full Name (Last, First, Middle Initial)

Greg Smith

Mailing Address 600 55th St.

City
ViennaState
WVZip Code
26105-3218Purpose of Disbursement
expense reimbursement

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B6C76C5C12E3A4B23837

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	9		2	0	1	0

Amount of Each Disbursement this Period

298.67

C.

Full Name (Last, First, Middle Initial)

Waterfront Place Hotel

Mailing Address Two Waterfront Place

City
MorgantownState
WVZip Code
26501-5958Purpose of Disbursement
annual meeting

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B367DD2AD21A5420C927

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	9		2	0	1	0

Amount of Each Disbursement this Period

4881.94

SUBTOTAL of Disbursements This Page (optional)

7580.61

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 24 / 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

A.

Full Name (Last, First, Middle Initial)

Getty Images(US), Inc.

Mailing Address P.O. Box 953604

City
St. Louis

State
MO

Zip Code
63195-3604

Purpose of Disbursement
advertisement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: BE26F1AA8B90E4654967

Date of Disbursement

07 / 21 / 2010

Amount of Each Disbursement this Period

1880.00

B.

Full Name (Last, First, Middle Initial)

Staples - Charleston

Mailing Address 2810 Mountaineer Blvd.

City
Charleston

State
WV

Zip Code
25309

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: BC6E55DBD7A554F9F9B0

Date of Disbursement

07 / 21 / 2010

Amount of Each Disbursement this Period

621.57

C.

Full Name (Last, First, Middle Initial)

Mrs. Melody L. Potter

Mailing Address 105 Newcomer Rd.

City
Charleston

State
WV

Zip Code
25309-8544

Purpose of Disbursement
In-kind:business mailing permit

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2009
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B8FE066B9C9E145618A1

Date of Disbursement

07 / 27 / 2010

Amount of Each Disbursement this Period

50.00

SUBTOTAL of Disbursements This Page (optional)

2551.57

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 25 / 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

A.

Full Name (Last, First, Middle Initial)

Dr. Douglas E. McKinney, MD

Mailing Address 636 Rivendell Drive

City
Bridgeport

State
WV

Zip Code
26330-1358

Purpose of Disbursement
In-kind: mileage and travel exp

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For: 2009
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: BA04FA51ED9E844BCA01

Date of Disbursement

/ /

Amount of Each Disbursement this Period

455.52

SUBTOTAL of Disbursements This Page (optional)

455.52

TOTAL This Period (last page this line number only)

52952.53

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 26 / 32

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
West Virginia Republican Party, Inc.**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Ac Express, Inc.Nature of Debt (Purpose):
Travel expense for speaker
for conventio

Mailing Address 1150 Airport Road

City State ZIP Code
Fairmont WV 26554

Outstanding Balance Beginning This Period

4214.56

Transaction ID: DD7A1B8D4F58A4BE3ACB

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4214.56

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
AlltellNature of Debt (Purpose):
Victory Cell Bill from 4/-
1/05

Mailing Address Bldg. 4 2nd Floor

City State ZIP Code
Little Rock AR 72202

Outstanding Balance Beginning This Period

8653.10

Transaction ID: D5F118EE3E608403BB7E

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

8653.10

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Bjw Printing & Office SuppliesNature of Debt (Purpose):
printing from 11/19/04

Mailing Address 3100 Robert Byrd Drive

City State ZIP Code
Beckley WV 25802

Outstanding Balance Beginning This Period

337.62

Transaction ID: D4EF771A3F5514EDD9BD

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

337.62

1) SUBTOTALS This Period This Page (optional).....

13205.28

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 27 / 32

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Bjw Printing & Office SuppliesNature of Debt (Purpose):
Interest

Mailing Address 3100 Robert Byrd Drive

City State ZIP Code
Beckley WV 25802

Outstanding Balance Beginning This Period

291.15

Transaction ID: D6825545A7104462E97A

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

291.15

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Cellular One/ A R SystemsNature of Debt (Purpose):
Cell Phone Bill from 4/1/-
05

Mailing Address P.O. Box 80766

City State ZIP Code
Valley Forge PA 19484

Outstanding Balance Beginning This Period

1057.45

Transaction ID: DC3068D8514F8455BB69

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1057.45

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Christine McnalleyNature of Debt (Purpose):
election contract consult-
ing-from 4/1/05

Mailing Address 44 Regent Court

City State ZIP Code
Swansea MA 02777

Outstanding Balance Beginning This Period

2400.00

Transaction ID: D25462FEAC2224BFE9E5

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2400.00

1) SUBTOTALS This Period This Page (optional).....

3748.60

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 28 / 32

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
West Virginia Republican Party, Inc.**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Dennie Data CommNature of Debt (Purpose):
past due bill from 10/30/-
04

Mailing Address 1339 Smith Street

City State ZIP Code
Charleston WV 25301

Outstanding Balance Beginning This Period

428.32

Transaction ID: D24FCCC3C7843427C8F7

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

428.32

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Feather Larson Synhorst-dciNature of Debt (Purpose):
fundraising calls from 10-
/31/2004

Mailing Address 7320 N Dreamy Draw Drive

City State ZIP Code
Phoenix AZ 85020

Outstanding Balance Beginning This Period

7119.20

Transaction ID: D6F78C6722F78438A82C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7119.20

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Fibernet-charlestonNature of Debt (Purpose):
Victory Field Office Phone
Acct.26417

Mailing Address 211 Leon Sullivan Way

City State ZIP Code
Charleston WV 25301

Outstanding Balance Beginning This Period

872.87

Transaction ID: D8F0AC59401D741A28E3

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

872.87

1) **SUBTOTALS** This Period This Page (optional).....

8420.39

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 29 / 32

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 Fibernet-charleston

 Nature of Debt (Purpose):
 Phones for 110 Capitol St.
 Office

Mailing Address 211 Leon Sullivan Way

City	State	ZIP Code
Charleston	WV	25301

Outstanding Balance Beginning This Period

1744.90

Transaction ID: D3B3C0EDD479D432D978

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1744.90

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 Komax Business Systems

 Nature of Debt (Purpose):
 copier service and parts
 past due 10/04

Mailing Address 500 D Street

City	State	ZIP Code
South Charleston	WV	25303

Outstanding Balance Beginning This Period

1960.01

Transaction ID: D0C9639D782124A75ADA

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1960.01

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 Komax Business Systems

 Nature of Debt (Purpose):
 Incorrect Debt Previouslly
 Reported 7/05

Mailing Address 500 D Street

City	State	ZIP Code
South Charleston	WV	25303

Outstanding Balance Beginning This Period

1.95

Transaction ID: D316A8B6DC2754ADFBC9

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1.95

1) **SUBTOTALS** This Period This Page (optional).....

3706.86

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 30 / 32

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
West Virginia Republican Party, Inc.**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Regional Distributing CenterNature of Debt (Purpose):
Toner and cartridge from
4/1/05

Mailing Address 872 S. Milwaukee Avenue #293

City State ZIP Code
Libertyville IL 60048

Outstanding Balance Beginning This Period

369.85

Transaction ID: D0E587ECFD6C840AE9DC

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

369.85

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Strategic FundraisingNature of Debt (Purpose):
fundraising services from
11/15/04

Mailing Address 7591 9th Street North

City State ZIP Code
Oakdale MN 55128

Outstanding Balance Beginning This Period

5411.86

Transaction ID: DD238924E343448EC960

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5411.86

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Strategic FundraisingNature of Debt (Purpose):
Interest from 7/31/05

Mailing Address 7591 9th Street North

City State ZIP Code
Oakdale MN 55128

Outstanding Balance Beginning This Period

135.77

Transaction ID: D8DB931917DAA4E53924

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

135.77

1) SUBTOTALS This Period This Page (optional).....

5917.48

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 31 / 32

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
West Virginia Republican Party, Inc.**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Strategic FundraisingNature of Debt (Purpose):
interest per Statement Su-
mmary today 1/08

Mailing Address 7591 9th Street North

City State ZIP Code
Oakdale MN 55128

Outstanding Balance Beginning This Period

689.32

Transaction ID: DC7D28A2143CB4F51AB5

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

689.32

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Strategic TelecommunicationsNature of Debt (Purpose):
Interest on Strategic Fun-
draising

Mailing Address 7591 9th Street North

City State ZIP Code
Oakdale MN 55128

Outstanding Balance Beginning This Period

1639.49

Transaction ID: D869D6D1194434CB9B41

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1639.49

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Tcs Technology ServiceNature of Debt (Purpose):
Computer Rental from 10/3-
0/2004

Mailing Address 4430 Kanawha Turnpike Suite B

City State ZIP Code
South Charleston WV 25309

Outstanding Balance Beginning This Period

927.31

Transaction ID: D9D2104C1A2E94DB3940

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

927.31

1) **SUBTOTALS** This Period This Page (optional).....

3256.12

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 32 / 32

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Tcs Technology ServiceNature of Debt (Purpose):
Computer Rental from 9/30-
/2004

Mailing Address 4430 Kanawha Turnpike Suite B

City State ZIP Code
South Charleston WV 25309

Outstanding Balance Beginning This Period

506.32

Transaction ID: DB43F53E3F16E430DB25

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

506.32

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Tiffany GibsonNature of Debt (Purpose):
Contract labor and expens-
es from 10/30/04

Mailing Address P.O. Box 425

City State ZIP Code
Parkersburg WV 26101

Outstanding Balance Beginning This Period

1030.95

Transaction ID: D88348031D76B4F6E893

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1030.95

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Time Warner CableNature of Debt (Purpose):
Victory Field Office cable
bill from 4/05

Mailing Address P.O. Box 580485

City State ZIP Code
Charlotte NC 28258

Outstanding Balance Beginning This Period

135.00

Transaction ID: D7704A876900941CB963

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

135.00

1) SUBTOTALS This Period This Page (optional).....

1672.27

2) TOTALS This Period (last page this line number only).....

39927.00

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....

0.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

39927.00